



I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service as Express Mail, Label No. EM053196057US, on the date shown below in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
Dated: July 11, 2007 Signature: *Andrea MacVarish*
(Andrea MacVarish)

Docket No.: 1235(203284)
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Joel Habener et al.

Application No.: 09/963,875

Confirmation No.: 9674

Filed: September 26, 2001

Art Unit: 1644

For: STEM CELLS OF THE ISLETS OF
LANGERHANS AND THEIR USE IN
TREATING DIABETES MELLITUS

Examiner: M. A. Belyavskyi

TRANSMITTAL LETTER

MS RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

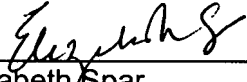
1. Fee Transmittal (1 page);
2. Request for RCE Transmittal;
3. Amendment and Response to Office Action;
4. Exhibits A through K;
5. Declaration Under 37 CFR 1.132 By Joel F. Habener, M.D.; and
6. Declaration Under 37 CFR 1.132 by Gordon C. Weir, M.D.

Please charge our Deposit Account No. 04-1105 in the amount of \$395.00 covering the required fees. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with

any paper hereafter filed in this application by this firm) to our Deposit Account No. 04-1105, under Order No. 1235(203284). A duplicate copy of this paper is enclosed.

Dated: July 11, 2007

Respectfully submitted,

By 
Elizabeth Spar

Registration No.: 45,123

Kathleen M. Williams

Registration No.: 34,380

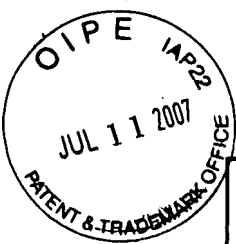
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PTO/SB/17 (06-07)

Approved for use through 06/30/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2007		Application Number	09/963,875-Conf. #9674
		Filing Date	September 26, 2001
		First Named Inventor	Joel Habener
		Examiner Name	M. A. Belyavskyi
		Art Unit	1644
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	1235(203284)
TOTAL AMOUNT OF PAYMENT	(\$) 395.00		

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>04-1105</u> Deposit Account Name: <u>Edwards Angell Palmer & Dodge LLP</u>			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee			
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments			

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
_____ - 20 = _____	x _____	= _____		<u>Fee (\$)</u> <u>Fee Paid (\$)</u>

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____ - 3 = _____	x _____	= _____	

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____ - 100 = _____	/50 = _____	(round up to a whole number) x _____	= _____	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2801 Request for continued examination (RCE) (see 37 ... 395.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	45,123
Name (Print/Type)	Elizabeth Spar	Telephone	(617) 439-4444
		Date	July 11, 2007

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